

| POSITION                  | INITIALS | ID NO. | DATE    |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION         | AH       | 12193  | 5/3/00  |
| O.I.P.E. CLASSIFIER       |          | 10     | 5/3/00  |
| FORMALITY REVIEW          |          | 7/622  | 6/25/00 |
| RESPONSE FORMALITY REVIEW |          | 7/622  | 8/8/00  |

### INDEX OF CLAIMS

|   |                            |   |              |
|---|----------------------------|---|--------------|
| ✓ | Rejected                   | N | Non-elected  |
| " | Allowed                    | I | Interference |
| - | (Through numeral) Canceled | A | Appeal       |
| + | Restricted                 | O | Objected     |

| Claim    | Date    |
|----------|---------|
| Final    |         |
| Original |         |
| 1        | 1/12/00 |
| 2        | 2/3/00  |
| 3        | 2/3/00  |
| 4        | 2/3/00  |
| 5        | 2/3/00  |
| 6        | 2/3/00  |
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| Claim    | Date |
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| Claim    | Date |
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| Final    |      |
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If more than 150 claims or 10 actions  
staple additional sheet here

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